



A 15-minute questionnaire on acquired immunodeficiency syndrome (AIDS) was introduced in the field August 10 by the National Center for Health Statistics (NCHS) as part of the National Health Interview Survey. This data collection effort has two primary aims: (a) to generate estimates of the public's knowledge and attitudes about AIDS and the AIDS virus, its transmission and prevention, and (b) to measure changes in knowledge and attitudes over time.

AIDS Questionnaire

From each family, one member age 18 years or older is randomly selected for a personal interview about sources of knowledge concerning AIDS, the difference between the disease AIDS and infection with the AIDS virus, modes and risks of transmitting the virus, and attitudes about those risks.

The respondent's opinions are sought concerning the likelihood of transmitting the virus through blood transfusions and donations, proximity to people who have the virus or the disease, sharing needles for drug use, and being bitten by animals or insects, as well as the efficacy of certain measures in preventing transmission during sexual intercourse. Issues concerning blood testing are also addressed.

To coordinate the development of this questionnaire, NCHS collaborated with these Public Health Service agencies: the Center for Prevention Services, Center for Infectious Diseases, and Center for Health Promotion and Education, all with the Centers for Disease Control (CDC); the National Institute of Mental Health at the Alcohol, Drug Abuse, and Mental Health Administration; the National Institute of Child Health and Human Development at the National Institutes of Health. Preliminary data will be published on a monthly basis in issues of *Advance Data* as early as November and periodically in CDC's "Morbidity and Mortality Weekly Report." The monthly estimates on major population groups can be accumulated to allow more in-depth analysis of data. The information from this study will provide necessary data to help evaluate programs

designed to inform the public about AIDS.

Survey of Reproductive Health

Data collection for the latest cycle (Cycle IV) of the National Survey of Family Growth (NSFG) will begin in January 1988. The NSFG is a periodic survey of the fertility, family planning, and reproductive health of American women ages 15-44. The survey is based on personal interviews with a national probability sample of about 8,000 women in their childbearing years and is conducted every 5 years.

The NSFG originally was conducted privately through a series of nationwide fertility surveys starting in 1955. The earlier studies showed significant changes over time in the patterns of family growth. The 1965 and 1970 National Fertility Studies documented, for example, the growing use of the pill and the IUD (intrauterine device) as family planning methods.

NCHS conducted the first cycle of the NSFG in 1973, continuing with Cycles II in 1976 and III in 1982. Cycle III introduced an important improvement in national fertility surveys. For the first time, the sample represented all women—previous surveys were limited to women who had been married or had had children. This change brought important new topics into the survey, such as the beginning of sexual activity, first use of contraceptives, first use of family planning services, and the role of the family and peers in pregnancy outcome.

For each woman selected to participate in the NSFG, the following information is collected:

- a complete pregnancy history of wanted and unwanted pregnancies by outcome;
- age at menarche, first intercourse, marriage, first pregnancy, and first birth. Various duration statistics are calculated, such as duration of breastfeeding, duration of pregnancy at first prenatal visit, and length of time between pregnancies;
- personal history of contraceptive use (including partner's methods) from first method to current method, duration of use of each method between

pregnancies in the previous 3 years, and use-effectiveness of contraception of specific methods;

- sterility, surgical sterilization, and fecundity impairments or infertility;
- adoptions, expected size of completed family, sex education, use of family planning, and fertility services; and
- prenatal and postnatal medical care, pelvic inflammatory disease, and use of the contraceptive pill by length of use and dosage.

Questions have been added in Cycle IV regarding respondents' knowledge about the risk of getting sexually transmitted diseases, including AIDS. The survey also measures changes in contraceptive and sexual behavior to avoid sexually transmitted diseases and AIDS.

1988 National Maternal and Infant Health Survey

Despite the continued decline in the overall infant mortality rate in the United States, maternal and infant health problems remain a challenge for the nation. The objective of the National Maternal and Infant Health Survey (NMIHS) is to collect, in a combined effort, the data needed by Federal, State, and private researchers to study factors related to poor pregnancy outcomes: low birth weight, stillbirth, infant illness, and infant death. This national survey of infant deaths will be the first one conducted since 1966.

The NMIHS will focus on events occurring in calendar year 1988. It will consist of three components: a natality survey, based on samples of 10,000 live births; a fetal mortality survey, based on a sample of 4,000 fetal deaths; and an infant mortality survey, based on a sample of 6,000 infant deaths.

The NMIHS will followback to sources named on vital records to obtain additional information. A total of 60,000 mothers, hospitals, and prenatal care providers will provide medical data.

Each mother will be asked to sign a request form to obtain data from her and her infant's medical care providers. Hospital records staff will be asked to complete a questionnaire

requesting medical information and financial data on the mother and her infant. Prenatal care providers will be asked about office visits, blood pressures, and tests. From the mothers, data will be collected on smoking habits, drinking of alcoholic beverages, nutrition, previous pregnancies, social and economic variables, infant feeding practices, and work during pregnancy.

The NMIHS will fill information gaps regarding the extent of AIDS testing by hospitals and prenatal care providers during prenatal care, the relationship of AIDS disease to pregnancy outcome, and characteristics of women with positive and negative test results. AIDS information can be related to all other information included in the NMIHS, including the vital records, mothers' hospital, and prenatal care questionnaires. Hospital and prenatal care providers will be asked whether one or more tests for AIDS were done during the mother's pregnancy. Information concerning dates of tests, types of tests, and whether any tests were positive will be collected.

A four-State pretest is being conducted in the fall and winter of 1987; all States are expected to participate in the main survey. The Census Bureau is collecting these data for NCHS.

Several Federal agencies have collaborated with NCHS-NMIHS staff in planning and funding the survey. Funding agencies in addition to NCHS are the National Institute on Drug Abuse; Division of Maternal and Child Health, Health Resources and Services Administration; National Institute of Child Health and Human Development; Food and Nutrition Service of the Department of Agriculture; and Food and Drug Administration.

Several other Federal agencies whose data interests were incorporated in the pretest are expected to financially support the main survey. The data interests of these agencies have been melded in the NMIHS, thus eliminating the need for each agency to do its own special survey. Sponsoring agencies will use data for the following purposes: to produce national estimates of unique information not on the vital records; to facilitate epidemiologic research on the etiology of adverse pregnancy outcome; to compute new fetal death ratios, perinatal mortality rates, and neonatal and postneonatal mortality rates; to develop programs to improve maternal

and child health; to assess demands on maternal and infant health delivery systems for health service delivery programs; to evaluate quality and completeness of information on State vital records; to generate standardized estimates for States and local areas; and to establish trends by comparing 1988 NMIHS results with the studies conducted over the past two decades.

The NMIHS has been endorsed by many national health organizations: the American Medical Records Association, American College of Obstetricians and Gynecologists, American College of Nurse-Midwives, American Academy of Pediatrics, American College of Health Care Executives, Association for Vital Records and Health Statistics, Association of State and Territorial Health Officials, March of Dimes, and Registrars in State and Independent Registration Areas of the United States.

New Publications

Vital and Health Statistics Series 2, No. 104, Comparability of Diagnostic Data, Coded by the 8th and 9th Revisions of the International Classification of Diseases, GPO Stock No. 017-022-01006-2. Price \$2

Vital and Health Statistics Series 2, No. 105, Reporting Chronic Conditions in the National Health Interview Survey, a Review of Tendencies from Evaluation Studies and Methodological Test, GPO Stock No. 017-022-01012-7. Price \$2.75

Vital and Health Statistics Series 2, No. 106, An Experimental Comparison of Telephone and Personal Health Interview Surveys, GPO Stock No. 017-022-01011-9. Price \$9

Vital and Health Statistics Series 23, No. 15, Married and Unmarried Couples: United States, 1982, GPO Stock No. 017-022-01007-1. Price \$3

Monthly Vital Statistics Report, Vol. 36, No. 4 Supplement, Advance Report of Final Natality Statistics, 1985

Monthly Vital Statistics Report, Vol. 36, No. 4 Supplement (2), Births of Hispanic Parentage, 1983 and 1984

Monthly Vital Statistics Report, Vol. 36, No. 5 Supplement, Advance Report of Final Mortality Statistics, 1985

Monthly Vital Statistics Report, Vol. 36, No. 5 Supplement (2), Induced Terminations of Pregnancy: Reporting States, 1984

Advance Data No. 130, Prevalence of Known Diabetes Among Black Americans

Advance Data No. 137, Diagnosis-Related Groups Using Data from the National Hospital Discharge Survey: United States, 1985

National Medical Care Utilization and Expenditure Survey, Series B, Descriptive Report No. 10, Family Use of Health Care, United States, 1980; GPO Stock No. 017-022-00987-1. Price \$15

National Medical Care Utilization and Expenditure Survey, Series B, Descriptive Report No. 11, Family Out-of-Pocket Expenditures for Health Care, United States, 1980, GPO Stock No. 017-022-01010-1. Price \$15

Catalog of Publications of the National Center for Health Statistics, 1980-86

For more information on the activities and publications described in this article, contact the Scientific and Technical Information Branch, 3700 East-West Highway, Hyattsville, MD, 20782; phone (301) 436-8500.

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